

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICATION NO.

10/019108

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL IND.	1					
TOTAL DER.						
TOTAL CLAIMS	1					

	1		2		3	
	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL IND.	1					
TOTAL DER.						
TOTAL CLAIMS	1					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADVERTISEMENTS

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